**Recipient Committee** Type or print in lnk. CITORE STAMERK **CALIFORNIA** Campaign Statement **FORM** Cover Page 2013 MAR 19 PM 12: 41 (Government Code Sections 84200-84216.5) Page Date of election if applicable: Statement covers period (Month, Day, Year) For Official Use Only 2/17/2013 from 4/02/2013 3/16/2013 SEE INSTRUCTIONS ON REVERSE through 2. Type of Statement: 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. Officeholder, Candidate Controlled Committee Preelection Statement Primarily Formed Ballot Measure Quarterly Statement O State Candidate Election Committee Committee Semi-annual Statement Special Odd-Year Report ○ Recall Controlled Termination Statement ☐ Supplemental Preelection (Also Complete Part 5) Sponsored (Also file a Form 410 Termination) Statement - Attach Form 495 (Also Complete Part 6) Amendment (Explain below) ☐ General Purpose Committee Primarily Formed Candidate/ Sponsored Officeholder Committee Small Contributor Committee (Also Complete Part 7) O Political Party/Central Committee I.D. NUMBER 3. Committee Information Treasurer(s) 1354884 NAME OF TREASURER COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Judith Cabrera Dan Cabrera for GUSD Board 2013 MAILING ADDRESS 1442 Imperial Drive STREET ADDRESS (NO P.O. BOX) CITY AREA CODE/PHONE ZIP CODE STATE 1442 Imperial Drive 91207 8182415302 Glendale CA NAME OF ASSISTANT TREASURER, IF ANY CITY STATE ZIP CODE AREA CODE/PHONE Glendale CA 91207 8182415302 Daniel C. Cabrera MAILING ADDRESS MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX 1442 Imperial Drive CITY ZIP CODE AREA CODE/PHONE STATE CITY STATE ZIP CODE AREA CODE/PHONE 8182415302 CA 91207 Glendale OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS dan@dcabrera.com 4. Verification I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. 3/19/2013 Executed on . Date 3/19/2013 Executed on ficeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor Executed on Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on. Signature of Controlling Officeholder, Candidate, State Measure Proponent FPPC Form 460 (January/05)

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Page _	2	of_	6	

NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE				
Daniel C. Cabrera						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AN		BALLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT OPPOSE
Member, Board of Governors, Glendal	e Unified School District	-				
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STR	EET) CITY STATE ZIP  Glendale CA 91207	Identify the controlling of	fficeholder, ca	ndidate, or sta	ate measure p	roponent, if an
1442 Imperial Drive,	Glendale CA 91207	NAME OF OFFICEHOLDER, CA	NDIDATE, OR PE	ROPONENT		
Related Committees Not Included in not included in this statement that are controlle contributions or make expenditures on behalf of	d by you or are primarily formed to receive	OFFICE SOUGHT OR HELD			DISTRICT NO. IF	ANY
COMMITTEE NAME	I.D. NUMBER					
COMMITTEE NAME	I.D. NUMBER	7 Primarily Formed Car	ndidate/Offic	ceholder Co	mmittee Lis	t names of
2	CONTROLLED COMMITTEE?	7. Primarily Formed Car officeholder(s) or candidate(	ndidate/Offic	ceholder Co	mmittee Lis primarily forme	t names of
NAME OF TREASURER	CONTROLLED COMMITTEE?	officeholder(s) or candidate(	(s) for which th	ceholder Co	primarily forme	d,
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NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS	CONTROLLED COMMITTEE?  YES NO  (NO P.O. BOX)  ZIP CODE AREA CODE/PHONE	NAME OF OFFICEHOLDER OR	CANDIDATE  CANDIDATE  CANDIDATE	OFFICE SOUG	primarily forme GHT OR HELD GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT

## Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Type or print in ink.

Amounts may be rounded to whole dollars.

				SUN	INIARY PAGE
Statem	ent covers period	CALI	FORN	IA	160
from	2/17/2013	FC	ORM		400
through _	3/16/2013	_ Page _	3	of	6
		I.D. NU	MBER		

NAME OF FILER 1354884 Dan Cabrera for GUSD Board Calendar Year Summary for Candidates Column A Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE General Elections 2410 7/1 to Date 1/1 through 6/30 0 1100 20. Contributions 425 3510 3. SUBTOTAL CASH CONTRIBUTIONS ...... Add Lines 1 + 2 \$ Received 0 0 Nonmonetary Contributions ...... Schedule C, Line 3 21. Expenditures 425 3510 Made TOTAL CONTRIBUTIONS RECEIVED ...... Add Lines 3 + 4 \$ \_ Expenditures Made **Expenditure Limit Summary for State** 2225 Candidates 6. Payments Made ...... Schedule E, Line 4 \$ 22. Cumulative Expenditures Made\* 943 2225 8. SUBTOTAL CASH PAYMENTS ...... Add Lines 6+7 \$ (If Subject to Voluntary Expenditure Limit) 570 570 Date of Election Total to Date (mm/dd/yy) 0 10. Nonmonetary Adjustment ...... Schedule C, Line 3 1513 2795 **Current Cash Statement** 1803 12. Beginning Cash Balance .................................. Previous Summary Page, Line 16 \$ To calculate Column B, add 425 amounts in Column A to the corresponding amounts \*Amounts in this section may be different from amounts from Column B of your last reported in Column B. report. Some amounts in 943 Column A may be negative 1285 figures that should be 16. ENDING CASH BALANCE ......... Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED ...... Schedule B. Part 2 \$ \_\_ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents ...... See instructions on reverse \$ \_\_\_ 570 FPPC Form 460 (January/05) 19. Outstanding Debts ...... Add Line 2 + Line 9 in Column B above \$ \_\_\_ FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

## Schedule A Monetary Contributions Received

Type or print in lnk.
Amounts may be rounded to whole dollars.

SCHEDULE A

CALIFORNIA 160

Statement covers period

			CONTROL CONTROL CONTROL CONTROL CONTROL	from2/17/	/2013	FORM	400
SEE INSTRUCTIO	ONS ON REVERSE			through3/1	6/2013	Page4	of6
NAME OF FILER	INS ON REVENSE.					I.D. NUMBER	
Dan Cabre	era for GUSD Board					1354884	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DEC.	AR TO	LECTION DATE QUIRED)
2/25/2013	Cecelia, E. Friesen 1111 Old Phillips Rd Glendale CA 91207	☑IND □COM □OTH □PTY □SCC	ret	100	10	00	
2/28/2013	Richard, Lila Ramirez 1000 E. Mountain Ave. Glendale CA 91207	☑IND □COM □OTH □PTY □SCC	ret	150	15	50	
	X)	□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					26
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL \$	250			
1. Amount re	A Summary ceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$	250	IND-	ributor Codes Individual – Recipient Commit (other than PTY)	
2. Amount re	ceived this period - unitemized monetary contributions	s of less than S	\$100 \$	175		<ul> <li>Other (e.g., busir</li> <li>Political Party</li> </ul>	
3. Total mone	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu			425	scc-	- Small Contributor	

Schedule E Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.			Statem from	ent covers period 2/17/2013	CALIFO FOR	
SEE INSTRUCTIONS ON REVERSE  NAME OF FILER  Dan Cabrera for GUSD Board		valu <u>jus — V</u> V		through _	3/16/2013	Page	
CODES: If one of the following codes accurately describes campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating urvey resear very and me	s	RAD radio RFD retur SAL camp TEL t.v. o TRC cand TRS staff/ TSF trans VOT voter	be the payment.  airtime and production ned contributions paign workers' salaries r cable airtime and prod idate travel, lodging, an spouse travel, lodging, fer between committee r registration mation technology costs	duction costs of meals and meals as of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (	DR DES	CRIPTION OF P	AYMENT		AMOUNT PAID
Los Angeles Times Los Angeles CA		PRT					570
Political Data Inc. PO 59570 Norwalk CA 90652		CNS	Mailing Lists				201
* Payments that are contributions or independent expenditures n	nust also be summ	arized on S	chedule D.		SI	JBTOTAL\$	771
Schedule E Summary  1. Itemized payments made this period. (Include all Schedule  2. Unitemized payments made this period of under \$100							771 172

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$ \_\_\_\_

943

						SCHEDULE F
Schedule F Accrued Expenses (Unpaid Bills)		Type or print in ink. Amounts may be rounded to whole dollars.	fror	Statement covers period 2/17/2013	CALIFORNIA FORM	460
SEE INSTRUCTIONS ON REVERSE			thro	ough3/16/2013	Page6	of6
NAME OF FILER			20.00		I.D. NUMBER	
Dan Cabrera for GUSD Board					1354884	
CODES: If one of the following codes accurately describe	s the	payment, you may enter the code. O	therwise	e, describe the payment	l.	
CMP campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production	costs	
CNS campaign consultants	MTG	meetings and appearances	RFD	returned contributions		
CTB contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries	untion costs	
CVC civic donations	PET	petition circulating phone banks	TEL	<ul> <li>t.v. or cable airtime and produced and date travel, lodging, and</li> </ul>		
FIL candidate filing/ballot fees FND fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and		
IND independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees		late/sponsor
LEG legal defense	PRO	professional services (legal, accounting)	VOT	voter registration		
LIT campaign literature and mailings	PRT	print ads	WEB	information technology costs	(internet, e-mail)	

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
LA Times	PRT	0	1140	570	570
				S Small Million 43 44 44 44	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 0	\$ 1140 <sup>5</sup>	\$ 570	\$ 570

## Schedule F Summary

•	onouno i Guilliani	
1.	. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	1140
2.	. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	570
	. Net change this period. ( <b>Subtract</b> Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	570 be a negative number